

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730915

FILED
Feb 01, 2009
Secretary of State

Entity Name: FLORIDA STATE WINNIE GATORS, INC.

Current Principal Place of Business:

2134 EVEREST PARKWAY
CAPE CORAL, FL 33904 US

New Principal Place of Business:

Current Mailing Address:

2134 EVEREST PARKWAY
CAPE CORAL, FL 33904 US

New Mailing Address:

FEI Number: 65-0426845 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

YETTER, DONALD W
1111 9TH AVE WEST
STE B
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TUZZOLO, LINDA
Address: 384 MOTORCOACH DR
City-St-Zip: POLK CITY, FL 33868

Title: 2VP () Delete
Name: MAENNER, LOUISE
Address: 120 NORTH RICKLYNN AVE.
City-St-Zip: LAKE ALFRED, FL 33850

Title: 2V () Delete
Name: SPILLER, CLIFF
Address: PO BOX 2428, PMB 6752
City-St-Zip: PENSACOLA, FL 32513

Title: D () Delete
Name: WARREN, GENG
Address: 13396 CLARENCE LANE
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: S () Delete
Name: BUSCH, CHARLENE
Address: 1094 MOTORCOACH DR
City-St-Zip: POLK CITY, FL 33868

Title: T () Delete
Name: MILLER, JERRY
Address: 2134 EVEREST PARKWAY
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MILLER, NANCY
Address: 2134 EVEREST PARKWAY
City-St-Zip: CAPE CORAL, FL 33904

Title: 1VP (X) Change () Addition
Name: LOUDENSLAGER, JOE
Address: 1176 ROYAL BOULEVARD
City-St-Zip: PALM HARBOR, FL 34684

Title: 2VP (X) Change () Addition
Name: SPILLER, CLIFF
Address: PO BOX 2428, PMB 6752
City-St-Zip: PENSACOLA, FL 32513

Title: D (X) Change () Addition
Name: TUZZOLO, LINDA
Address: 384 MOTOR COACH DRIVE SOUTH
City-St-Zip: POLK CITY, FL 33868

Title: S (X) Change () Addition
Name: GRIFFIN, KATHRYN
Address: 10009 HORSE CREEK ROAD
City-St-Zip: FORT MYERS, FL 33913

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERRY MILLER

T

02/01/2009

Electronic Signature of Signing Officer or Director

Date